Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005

Application Number	10/764,603
Filing Date	1/27/2004
First Named Inventor	Ota
Examiner Name	Dennis H. Pedder
Art Unit	3612

☐ Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	($) 120	Attorney Docket No.	26E-006

METHOD OF PAYMENT (check all that apply)

☑ Check ☐ None ☐ Other (please identify):

☑ Deposit Account   Deposit Account Number: **50-1147**   Deposit Account Name: **Posz Law Group, PLC**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☑ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   ☑ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES Fee ($)	Small Entity Fee ($)	SEARCH FEES Fee ($)	Small Entity Fee ($)	EXAMINATION FEES Fee ($)	Small Entity Fee ($)	Fees Paid ($)
Utility	300	150	500	250	200	100	$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	Small Entity Fee ($)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)	Multiple Dependent Claims Fee ($)	Fee Paid ($)
- 20 or HP =	x	=			

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)
- 3 or HP =	x	=	

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is $ ($ for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).

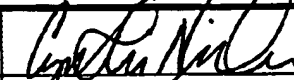| Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, $130 fee (no small entity discount)

Other: Petition for Extension of Time (1 month)

Fees Paid ($)
120

SUBMITTED BY

Signature	*[signature]*	Registration No. (Attorney/Agent)	36,880	Telephone	(703) 707-9110
Name (Print/Type)	Cynthia K. Nicholson			Date	15 April 2005